## STATE OF SOUTH DAKOTA Statement of Legal Newspaper Ownership and Circulation

DEC 23 705

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077				S.D. SEC. of STATE
The Burke Gazette 2. DATE 9/26/05				
3. FREQUENCY OF ISSUE 3A. NO. OF ISSUES PUBLIS Weekly 52	SUES PUBLISHED ANNUALLY 3B. ANNUAL SUBSCRIPTION PRICE \$ \$24 \$28 \$30			
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code)				
(Not printers) PO Box 359 Burke, Grego	ry, SD, 5752	3-0359	9	
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTE PUBLISHER (Not printers)  Same	ERS OR GENERAL BU	SINESS O	FFICES OF THE	
6. FULL NAME OF PUBLISHER: C I Fahron	hachar	······································		-
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.  FULL NAME  C. J. Fahrenbacher  C. J. Fahrenbacher  C. OWNER (If owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.  FULL NAME  COMPLETE MAILING ADDRESS				
				i.
C. J. Fahrenbacher PO Box 359, Burke, SD 57523-0359  8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1				_
PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, M. state. If more space is needed, list on back of this form.	ORTGAGES OR OTH	ER SECUR	RITIES (If there are none, so	
None	AVERAGE NO. CO	DIEC		_
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. CO EACH ISSUED PRECEDIN MONTHS	-	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE	
A.TOTAL NO. COPIES (Net Press Run)	1550	50° 20° 10° 10° 10° 10° 10° 10° 10° 10° 10° 1	1550	
B.PAID AND/OR REQUESTED CIRCULATION				
<ol> <li>Sales through dealers and carriers, street vendors and counter sales.</li> </ol>	385		385	
2. Mail Subscription	980		986	
(Paid and or requested)  C.TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	1365		1371	
D.FREE DISTRIBUTION  1. BY MAIL, CARRIER OR OTHER MEANS	10		10	
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	0		0	
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	1375		1381	
F. COPIES NOT DISTRIBUTED  1. Office use, left over, unaccounted, spoiled after printing	92		92	
2. Return from News Agents	83		77	
G.TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	1550		1550	
Statement must be signed by Publisher, Business Mana I swear that the statements made by me are true, or			of a Notary Public	
(Signature)	Owner/Publisher (Title)			
State of South Dakota )	Sworn to before me this 26 day of Sept., 20 05			
County of Gregory	Notary Public			
(Seal)	My commission expi	res:	10/17/09	_